

Scout Association of Hong Kong



Camp Application Form

Please read the respective Booking Guide carefully before completing this form.

For Office Use Only

Received on _____	Scout Unit <input type="checkbox"/> Non-Scout Unit <input type="checkbox"/>
Fee(s) _____	Accepted <input type="checkbox"/> Rejected <input type="checkbox"/>
Cash / Bank _____	Application No. _____
Received by _____	Due Date _____
	Cheques No. _____
	Receipt No. _____

(A) Application for Camp / Centre (Please tick "✓" one appropriate box only.)

<input type="checkbox"/> Tung Tsz Scout Centre (TTZ)	Tel: 2665 8082 Fax: 2666 6191 e-mail: ttz@scout.org.hk	<input type="checkbox"/> Tai Tam Scout Centre (TTM)	Tel: 2813 8150 Fax: 2813 7391 e-mail: ttm@scout.org.hk
<input type="checkbox"/> Tai Mei Tuk Sea Activity Centre (TMT)			
<input type="checkbox"/> Shatin Scout Centre (STC)			
<input type="checkbox"/> Choi Chee Ming Luen Kwong Scout Centre (CCMLK)			
<input type="checkbox"/> Pak Sha Wan Tam Wah Ching Sea Activity Centre (PSW)	Tel: 2719 8979 Fax: 2358 2177 e-mail: psw@scout.org.hk	<input type="checkbox"/> Gilwell Campsite (GIL)	Tel: 2957 6481 Fax: 2302 1163 e-mail: gilwell@scout.org.hk

(B) Particulars of applicant (The personal data and other related information provided herein will be used by the Camp / Centre for dealing with the application and its related purposes. The provision of personal data and other related information by means of the application form is voluntary. However, submission of inaccurate or inadequate data may cause delay or failure in processing the application.) * Delete whichever is inapplicable.

Scout Unit / Name of Organization			
Title of event			
Name of applicant of Scout Unit / Organization	(Mr./Miss/Ms.)*	Email address	
Contact telephone number	Day Time	Mobile	Fax
Name of Programme-in-charge	(Mr./Miss/Ms.)*	Email address	
Correspondence address			
Contact telephone number	Day Time	Mobile	Fax

(C) Camp period and number of participants

Nature of Camp	Period		No. of Participants			Facilities Required (Please tick "✓" the appropriate box.)					
	1 st Choice	2 nd Choice	Male	Female	Total	Facilities	TTZ	TTM	PSW	GIL	STC
Day Camp						Hall					
Evening Camp						Activities Room/ Lecture Room					
Tent Camp						Campfire Circle					
Residential Camp						BBQ Area					

(D) Number of boats and crafts required (For booking of Pak Sha Wan / Tai Tam / Tai Mei Tuk Sea Activity Centre only.)

Type	Capacity	No. of Crafts	Date	Time (Note 1) (Please tick "✓" the appropriate box.)	Instructor(s) Required
Canoe	1 person			<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> Whole Day	person (s)
Canoe	2 persons			<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> Whole Day	person (s)
Sailing Dinghy	1 person			<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> Whole Day	person (s)
Sailing Dinghy	2 persons			<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> Whole Day	person (s)
Standard Boat	7 persons			<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> Whole Day	person (s)
Windsurfer	1 person			<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> Whole Day	person (s)
Dragon Boat (Note 2)	10 persons			<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> Whole Day	person (s)
Dragon Boat (Note 3)	20 persons			<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> Whole Day	person (s)

Note 1 : Time : AM(09:30 to 12:30) PM(13:30 to 16:30) Whole Day (09:30 to 16:30)

Note 2 : Available at Tai Mei Tuk Sea Activity Centre & Pak Sha Wan Tam Wah Ching Sea Activity Centre.

Note 3 : Only available at Pak Sha Wan Tam Wah Ching Sea Activity Centre.

(E) I confirm that the information given above are correct and agree to abide by the rules and conditions set out by the Camp / Centre.

Signature of Applicant	Organization Chop	Name : _____
		Address : _____
Date		

Scout Association of Hong Kong
Pak Sha Wan Tam Wah Ching Sea Activity centre
Equipment and Venue Reservation Form

Information :

Unit : _____ Person In Charge : _____

Date : _____ Contact No. : _____

Booking Capacity: _____ Signature of PIC : _____

Reserving guideline :

1. Please return the filled form within the immediate 2 weeks of the intended date of use by Email (psw@scout.org.hk) or Facsimile (2358 2177) . Late reservation will not be entertained .
2. For the Equipment and venue fee, please refer to "Camp Fee".
3. All the equipment and venue will be arranged base on the "Camp Rules and Regulations". The Center reserves the right to reject any reservation(s) without the need to give any explanation. Units may be required to share those free outdoor areas with other parties.
4. Units are required to tidy up all the equipment and venue after use. If there is any damage, please pay in full price.

Equipment and Venue	Date and Time
Hall	
Activity Room	
Conference Room	
Kitchen (1 / 2 / 3 set)	
Lawn (zone / area: _____)	
Shelter area outside Kitchen (Max. capacity: 30)	
White shelter area outside Kitchen (Max. capacity: 45)	
White Shelter area next to the BBQ site (Max. capacity: 20)	
Shelter area between the containers (Max. capacity: 30)	
Campfire Area	
Barbeque Area	
Barbeque Stove (Quantity: _____)	
3m X 3m Marquee (Quantity: _____)	
Mat (Quantity: _____)	
Pioneering Equipment	
LCD projector	
Audio system	
Others (Please specify: _____)	

To reserve the parking lot, please list out the car plate number : _____ (Please refer to the "Parking Lot Guideline")